PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10849195

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
(Column 1) (Column								TYPE [OR	•		
TOTAL CLAIMS			168					RATE	FEE	7	RATE	FEE	
FC	OR		NUMBER FILED		NUME	BER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TC	TAL CHARGE	ABLE CLAIMS	16 kminus 20=		* 14	×8		X\$ 9=		OR	X\$1.8=		
INE	DEPENDENT C	LAIMS	2 4 m	inus 3 =	*31			X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	•	
* If the difference in column 1 is less than zero, enter "0" in column						column 2		TOTAL		OR	TOTAL	v.	
CLAIMS AS AMENDED - PART II											OTHER	THAN	
	·	(Column 1)				(Column 3)		SMALL	ENTITY	OR	SMALL I		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER SUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	<u> </u>	=	[X43=	-	OR	X86=	,	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=		
The Customal Say Somo amou Raid but it is Med app.							-	TOTAL DDIT. FEE			TOTAL		
1	(Column 1) (Column 2) (Column 3									J /	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST SER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=] [X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
							L	+145=		OR	+290=	•	
		•					. A l	TOTAL DDIT. FEE		OR ,	TOTAL ODIT. FEE		
		(Column 1) CLAIMS		(Colum		(Column 3)		•					
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	drik .		=	lΓ	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	╽┟	X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							7410-		OR	X00=		
* If the entry in column 1 is less than the autoria astronomy as the second								+145=		OR	+290=		
** H	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."							TOTAL DIT. FEE	· .	OR A	TOTAL DDIT. FEE		
7	he "Highest Num	mber Previously Paid ber Previously Paid	iu ror in THIS For" (Total or	SPACE is Independer	iess thar nt) is the	n 3, enter "3." highest numbe			opriate box				